



Freedom of Information Request

26th August 2024

Question

Detail

Can you please provide the following information for the years 2020 to 2024 separated into each year alone; I. Total hours spent by A&E ambulances waiting to handover patients to Aberdeen Royal infirmary (ARI) A&E or AMIAU (ward 101). II. The total financial costs or average costs of these lost hours, staff wages etc. due to ambulances stacking outside of ARI. III. The number of patients who have went into cardiac arrest or died in the back of an ambulance outside of ARI whilst waiting to be accepted into the hospital.

Answer

I. Total hours spent by A&E ambulances waiting to handover patients to Aberdeen Royal

Please see the table below detailing the total number of conveyances to ARI; the median, 90th percentile and total turnaround times for the date period of 01/01/2020 - 31/12/2023.

		2020	2021	2022	2023
Aberdeen Royal Infirmary (Aberdeen)	Conveyances	21815	24827	25965	25627
	Median	30:06	37:01	51:05	56:33
	90th Percentile	54:42	103:47	175:39	203:34
	Total Turnaround Time	750,113.10	1,250,893.74	2,035,152.44	2,269,713.92

Please note caution when interpreting this data The Scottish Ambulance Service does not record the time taken to discharge/handover a patient from an ambulance on arrival at a hospital. The Service does record turnaround times, which is from when an ambulance arrives at hospital to the point of departure. These turnaround times are affected by a wide range of factors, including ambulance staff cleaning vehicles following patient transportation and providing statements to the police. Our local management teams are working closely with Health Boards to ensure that ambulances are released as quickly as possible.

II. The total financial costs or average costs of these lost hours, staff wages etc. due to ambulances stacking outside of ARI.

The Scottish Ambulance Service does not have a definition for 'hours lost' and therefore cannot provide an accurate account of the information you have requested.



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The financial implications of these turnaround times is not held in a way that would make it easily reportable.

Public authorities are not required to create information in order to answer a request. There's a distinction between creating new information, and compiling information. Where a request can be answered by compiling information from readily-available resources held by the public authority, this is not the same as creating new information. However, if collation of the information would require skill and complex judgement, the information is not held.

I have concluded that, in the case of working out the financial costs associated with turnaround times would not be able to be produced without complex skill and judgement. This is because, although we hold information on turnaround times, to report these at cost levels, we would be required to look at each ambulance to determine staff and proportion time/wages etc which would require complex judgement.

It is for this reason that we have applied the exemption Section 17 of the Freedom of Information Scotland Act 2002 as information not held.

III. **The number of patients who have went into cardiac arrest or died in the back of an ambulance outside of ARI whilst waiting to be accepted into the hospital.**

The Scottish Ambulance Service reports on the chief complaint of patients and cannot report on the status of patients while in the back of an ambulance.

The Scottish Ambulance service does not hold causation data for death and for this we would ask you to re-direct your request to the National Records of Scotland and Public Health Scotland, Data and Intelligence (previously known as ISD Scotland). This is where you will find the information regarding the number of deaths, under a stated category.

All patients are monitored closely by Ambulance Service staff while waiting to be transferred into the hospital. Any deterioration in the patient's health is communicated to the receiving hospital.